Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
yo pi	Write the name that is on your government-issued picture identification (for example, your driver's	Alfonzo First name		Shontavia First name
	license or passport).	Middle name		Middle name
	Bring your picture identification to your meeting with the trustee.	Williams Last name and Suffix (Sr., Jr., II, III)	_	Tinsley  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have	/e		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7387		xxx-xx-1461

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)		
	ū	EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		29924 Meridian Place Apt 21101 Farmington, MI 48331 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Oakland County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one:  Over the last 180 days before filling this petition, I have lived in this district longer than in any other		
		other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	otor 1 otor 2	Alfonzo Williams Shontavia Tinsley					Case number (if known)	
Par	t 2:	Tell the Court About \	∕our Bank	ruptcy Ca	ase			
7.	Bank	chapter of the cruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankru	ıptcy
	choc	sing to file under	■ Chapt	ter 7				
			☐ Chapt	ter 11				
			☐ Chapt	ter 12				
			☐ Chapt	ter 13				
8.	How	you will pay the fee	abo ord	out how yo	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or lf, your attorney may pay with a credit card or che	money
						Iments. If you choose this optio Official Form 103A).	n, sign and attach the Application for Individuals to	o Pay
			☐ I re but app	equest that is not reco	at my fee be waive juired to, waive you ur family size and	ed (You may request this option ur fee, and may do so only if you you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judg ur income is less than 150% of the official poverty installments). If you choose this option, you must al Form 103B) and file it with your petition.	line that
Have you filed for bankruptcy within the		■ No.						
	last 8 years?		☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	□ No.	Go to	line 12.			
	resid	lence?	Yes.	Has yo	our landlord obtaine	ed an eviction judgment against	you?	
					No. Go to line 12			
					Yes. Fill out <i>Initia</i> bankruptcy petition		udgment Against You (Form 101A) and file it with	this

	otor 1 Alfonzo Williams otor 2 Shontavia Tinsley				Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Owi	n as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you in	ndicate that you are low statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
	- •				Number, Street, City, State & Zip Code	

Debtor 1 Alfonzo Williams Debtor 2 Shontavia Tinsley

Case number (if known)

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

		Alfonzo Williams Shontavia Tinsley			С	ase number (if k	nown)
Pari	t 6: An	swer These Questi	ons for Repo	orting Purposes			
		ind of debts do	16a. <b>A</b> r				n 11 U.S.C. § 101(8) as "incurred by an
				No. Go to line 16b.			
				Yes. Go to line 17.			
				e your debts primarily busined property for a business or investmen			
				No. Go to line 16c.			
				Yes. Go to line 17.			
			16c. St	ate the type of debts you owe th	at are not consumer debts	or business de	bts
17.	Are you Chapte	ı filing under r 7?	□ No. I a	m not filing under Chapter 7. Go	to line 18.		
Do you estimate that after any exempt property is excluded and			m filing under Chapter 7. Do yoເ e paid that funds will be available			is excluded and administrative expenses	
		strative expenses d that funds will		No			
	be available for distribution to unsecured creditors?			Yes			
18.		any Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000
	you est owe?	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000
			□ 100-199 □ 200-999		10,001-25,000		☐ More than100,000
19. How much d			<b>\$</b> 0 - \$50,0	000	□ \$1,000,001 - \$10 milli	ion	□ \$500,000,001 - \$1 billion
	be wor	te your assets to th?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000		□ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 m		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			□ \$100,001 □ \$500,001		☐ \$100,000,001 - \$100 H		☐ More than \$50 billion
20.		uch do you	□ \$0 - \$50,0	000	□ \$1,000,001 - \$10 milli		□ \$500,000,001 - \$1 billion
	to be?	te your liabilities	\$50,001	' '	□ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 m		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			□ \$100,001 □ \$500,001		□ \$100,000,001 - \$100 H		☐ More than \$50 billion
Part	17: Sig	gn Below					
For	you		I have exam	ined this petition, and I declare u	inder penalty of perjury tha	at the informatio	n provided is true and correct.
				sen to file under Chapter 7, I am s Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, eto proceed under Chapter 7.
				represents me and I did not pathave obtained and read the notion			attorney to help me fill out this
			I request reli	ef in accordance with the chapte	er of title 11, United States	Code, specified	I in this petition.
							perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519,
			/s/ Alfonzo			ntavia Tinsley	
			Alfonzo Will Signature of			via Tinsley re of Debtor 2	
			Executed on		Execute		
				MM / DD / YYYY		MM / DE	<i>)  </i>

Debtor 1	Alfonzo Williams		
Debtor 2	Shontavia Tinsley	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tierney Eaton-Hoffman	Date	April 16, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Tierney Eaton-Hoffman P80759		
Printed name		
MAXWELL DUNN, PLC		
Firm name		
24725 W. 12 Mile Rd., Ste. 306		
Southfield, MI 48034		
Number, Street, City, State & ZIP Code		
Contact phone (248) 246-1166	Email address	bankruptcy@maxwelldunnlaw.com
P80759 MI		
Bar number & State		

	1 Alfonzo Williamo				
Debtor	1 Alfonzo Williams First Name	Middle Name	Last Name		
Debtor	2 Shontavia Tinsley				
Spouse		Middle Name	Last Name		
Jnited	States Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
2000 n	umbor		_		
if known	umber			☐ Check	if this is an
				amend	ded filing
Sum Be as c	omplete and accurate as possik tion. Fill out all of your schedul	ble. If two married peopl les first; then complete t	nd Certain Statistical Information e are filing together, both are equally responsible for the information on this form. If you are filing amend the box at the top of this page.	r supplyin	
Part 1:	Summarize Your Assets				
				Your as Value o	ssets f what you own
1. <b>S</b> o	chedule A/B: Property (Official F a. Copy line 55, Total real estate, f	orm 106A/B) irom Schedule A/B		\$	0.00
11	o. Copy line 62, Total personal pro	perty, from Schedule A/B		\$	16,551.73
10	. Copy line 63, Total of all propert	y on Schedule A/B		\$	16,551.73
Part 2:	Summarize Your Liabilities				
					abilities t you owe
	chedule D: Creditors Who Have C a. Copy the total you listed in Colu		y (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	0.00
3. S	chedule E/F: Creditors Who Have a. Copy the total claims from Part	Unsecured Claims (Official (priority unsecured claims)	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
3h	. Copy the total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	99,586.00
			Your total liabilities	\$	99,586.00
Part 3:	Summarize Your Income and	l Expenses			
	chedule I: Your Income (Official Fo		e /	\$	4,996.34
	chedule J: Your Expenses (Officia opy your monthly expenses from I			\$	4,917.50
	Answer These Questions for	Administrative and Sta	tistical Records		
Part 4:		ler Chapters 7, 11, or 13			andulan
		t on this part of the form. (	Check this box and submit this form to the court with yo	ur other scr	iedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1	Alfonzo Williams	
Debtor 2	Shontavia Tinslev	

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,242.69

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	76,963.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	76,963.00

Fill in this infor	mation to identify your case and this filing:	
Debtor 1	Alfonzo Williams	
Dobtor 2	First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing)	Shontavia Tinsley First Name Middle Name Last Name	
United States Ba	inkruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
		_
Case number _		☐ Check if this is an amended filing
		amonada ming
Official Ea	orm 106A/B	
	e A/B: Property	12/15
think it fits best. B	separately list and describe items. List an asset only once. If an asset fits in more than one category, list the site as complete and accurate as possible. If two married people are filing together, both are equally responsible space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name astion.	le for supplying correct
Part 1: Describe	Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
1. Do you own or l	have any legal or equitable interest in any residence, building, land, or similar property?	
No. Go to Par	t 2.	
☐ Yes. Where i	s the property?	
Part 2: Describe	Your Vehicles	
someone else dri	se, or have legal or equitable interest in any vehicles, whether they are registered or not? Include ves. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
3. Cars, vans, tr	ucks, tractors, sport utility vehicles, motorcycles	
■ No		
☐ Yes		
Examples: Boa	rcraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories tts, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No		
☐ Yes		
	ar value of the portion you own for all of your entries from Part 2, including any entries for ave attached for Part 2. Write that number here=>	\$0.00
	Your Personal and Household Items	Occurrent control of the
Do you own or	have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	pods and furnishings ajor appliances, furniture, linens, china, kitchenware	ciains of exemptions.
Tes. Desc	TIDE	
	Utensils (\$50.00), Dining Room furniture(\$100.00), Dresser (\$100.00), Bedroom furniture(\$3000.00), Microwave(\$50.00), Lamps and accessories(\$50.00), Cookware(\$50.00)	
	Location: 29924 Meridian Place Apt 21101, Farmington MI 48331	\$3,400.00

Debtor Debtor			(if known)
7. Elec Exa	mples: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners I phones, cameras, media players, games	s; music collections; electronic devices
■ N □ Y	o es. Describe		
	other collect	I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stations, memorabilia, collectibles	mp, coin, or baseball card collections;
	es. Describe		
	musical inst	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	; canoes and kayaks; carpentry tools;
	es. Describe		
_	amples: Pistols, rifle	s, shotguns, ammunition, and related equipment	
■ N □ Y	o es. Describe		
	<i>amples:</i> Everyday c	lothes, furs, leather coats, designer wear, shoes, accessories	
		various articles of clothing for debtors (\$200.00) Location: 29924 Meridian Place Apt 21101, Farmington MI 48331	\$200.00
		Various articles of clothing for Debtor 1 & 2 Children (\$100.00) Location: 29924 Meridian Place Apt 21101, Farmington MI 48331	\$100.00
	amples: Everyday je	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
		Costume Jewelry, Wedding Rings (\$2500.00)	\$2,500.00
Ex ■ N	n-farm animals amples: Dogs, cats, o es. Describe	birds, horses	
■ N		nd household items you did not already list, including any health aids you did n	ot list
		of all of your entries from Part 3, including any entries for pages you have attain number here	\$6,200.00
Part 4:	Describe Your Final	ncial Assets	
Do you	own or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

	ebtor 1 ebtor 2	Alfonzo Williams Shontavia Tinslo			Case number (if known)	
16	Cash		<u>- y</u>			
10.	Examp	oles: Money you hav	e in y	our wallet, in your h	ome, in a safe deposit box, and on hand when you file your petition	
	■ No					
	⊔ Yes					
17.					counts; certificates of deposit; shares in credit unions, brokerage houses, and othes with the same institution, list each.	ner similar
	□ No	montanono. n y	ou na	ve manipie account	with the dame inditation, list each.	
	Yes				Institution name:	
			17.1.	Savings	LOC Federal Credit Union	\$1,045.00
			17.0	Debit Card	Global Cash Card	\$1,300.00
			17.2.	Debit Card	Global Gash Gald	Ψ1,300.00
18.	Bonds.	mutual funds, or	public	lv traded stocks		
	Examp				rokerage firms, money market accounts	
	■ No			Institution or issue	r name:	
40						anto analika anal
19.	joint v		k and	interests in incorp	porated and unincorporated businesses, including an interest in an LLC, pa	artnersnip, and
	■ No					
	⊔ Yes.	Give specific inform		about them ne of entity:	% of ownership:	
20	Govern	ment and corpora	te boi	nds and other neg	otiable and non-negotiable instruments	
20.	Negoti	able instruments inc	lude p	personal checks, ca	ashiers' checks, promissory notes, and money orders. cansfer to someone by signing or delivering them.	
	■ No					
	☐ Yes.	Give specific inform				
			Issi	uer name:		
21.		nent or pension ac			400(1) (1) (6)	
	Examp  ■ No	oles: Interests in IRA	, ERIS	SA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	_	List each account se	eparat	elv.		
				of account:	Institution name:	
22.		y deposits and pre				
					to that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies, or others	
					Institution name or individual:	
			Secu	rity Deposit	Citation Club (\$500.00)	\$500.00
			Secu	rity Deposit	Citation Club (\$500.00)	\$
23.		ies (A contract for a	perio	dic payment of mon	ney to you, either for life or for a number of years)	
	■ No	leeue	r nam	e and description.		
	☐ Yes	ISSUE	i IIaIII	e and description.		
24.		s in an education I C. §§ 530(b)(1), 529			qualified ABLE program, or under a qualified state tuition program.	
	■ No					
	☐ Yes	Institu	ution r	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	`	equitable or future	e inte	rests in property (	other than anything listed in line 1), and rights or powers exercisable for yo	our benefit
	■ No	Give specific inform	nation	about them		
	<u> </u>	OIAC Shering IIIIOIII	iatiOH	about them		

Debtor 1 Debtor 2			Case number (if known)	
Exa ■ No	imples: Internet domain names, web	e secrets, and other intellectual property sites, proceeds from royalties and licensing a hem	greements	
Exa ■ No		censes, cooperative association holdings, liqu	or licenses, professional license	es
☐ Ye	es. Give specific information about t	hem		
Money	or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>Tax</b> □ No	refunds owed to you			
		nem, including whether you already filed the re	eturns and the tax years	
		Estimated tax return for 2018 (\$4913.0	5) Federal	\$4,913.05
		Estimated prorated tax return for 2019 (\$1637.68)	Federal	\$1,637.68
		Estimated income tax refund for 2018(\$956.00)	State	\$956.00
<i>Exa</i> ■ No		ny, spousal support, child support, maintenan	ce, divorce settlement, property	settlement
	benefits; unpaid loans you n	urance payments, disability benefits, sick pay, nade to someone else	vacation pay, workers' comper	nsation, Social Security
	es. Give specific information			
		rance; health savings account (HSA); credit, h	omeowner's, or renter's insuran	ice
■ Ye	es. Name the insurance company of Company		eneficiary:	Surrender or refund value:
		insurance policy through (no cash value)		\$0.00
		insurance policy through (no cash value)		\$0.00
32. <b>Any</b>	employer Term life	insurance policy through (no cash value)		

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

Debto Debto		Alfonzo Williams Shontavia Tinsley		Case number (if known)	
	Yes.	Give specific information			
_E		s against third parties, whether or not you have filed a law bles: Accidents, employment disputes, insurance claims, or rig		and for payment	
		Describe each claim			
34. <b>O</b> 1	ther	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
	No Yes.	Describe each claim			
35. <b>A</b> ı	ny fir	nancial assets you did not already list			
	No				
	Yes.	Give specific information			
		the dollar value of all of your entries from Part 4, including art 4. Write that number here			\$10,351.73
Part 5	De	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. <b>Do</b>	you	own or have any legal or equitable interest in any business-relate	d property?		
	No. Go	o to Part 6.			
ΠY	es. C	Go to line 38.			
_	If y	scribe Any Farm- and Commercial Fishing-Related Property You out own or have an interest in farmland, list it in Part 1.  Jown or have any legal or equitable interest in any farm-Go to Part 7.			
	] Yes	Go to line 47.			
Part 7	:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
E	xam <sub>l</sub> No	a have other property of any kind you did not already list?  bles: Season tickets, country club membership  Give specific information			
54. <i>I</i>	Add 1	the dollar value of all of your entries from Part 7. Write tha	nt number here		\$0.00
Part 8	:	List the Totals of Each Part of this Form			
55. <b>I</b>	Part <sup>2</sup>	1: Total real estate, line 2			\$0.00
		2: Total vehicles, line 5	\$0.00		
57. <b>I</b>	Part :	3: Total personal and household items, line 15	\$6,200.00		
		4: Total financial assets, line 36	\$10,351.73		
59. <b>I</b>	Part !	5: Total business-related property, line 45	\$0.00		
60. <b>I</b>	Part (	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>I</b>	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$16,551.73	Copy personal property t	otal \$16,551.73
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$16,551.73

Fill in this infor	mation to identify your	case:		
Debtor 1	Alfonzo Williams First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number (if known)				☐ Check if this is an
				amended filing

## Jiliciai form Tubu

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identity the Property You Claim as Exempt	

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.						
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Dε	Utensils (\$50.00), Dining Room furniture(\$100.00), Dresser (\$100.00), Bedroom furniture(\$3000.00),	\$3,400.00	<b>=</b>	\$1,700.00 100% of fair market value, up to	11 U.S.C. § 522(d)(3)	
	Microwave(\$50.00), Lamps and accessories(\$50.00), Cookware(\$50.00) Location: 29924 Meridian Place Apt 21101, Farmington MI 48331 Line from <i>Schedule A/B</i> : 6.1			any applicable statutory limit		
	various articles of clothing for debtors (\$200.00)	\$200.00		\$100.00	11 U.S.C. § 522(d)(3)	
	Location: 29924 Meridian Place Apt 21101, Farmington MI 48331 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit		
	Various articles of clothing for Debtor 1 & 2 Children (\$100.00)	\$100.00		\$50.00	11 U.S.C. § 522(d)(3)	
	Location: 29924 Meridian Place Apt 21101, Farmington MI 48331 Line from <i>Schedule A/B</i> : 11.2			100% of fair market value, up to any applicable statutory limit		
	Costume Jewelry, Wedding Rings (\$2500.00)	\$2,500.00		\$1,250.00	11 U.S.C. § 522(d)(4)	
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 4

of description of the property and line on the dule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B			Specific laws that allow exemption
bit Card: Global Cash Card e from <i>Schedule A/B</i> : 17.2	\$1,300.00		\$1,300.00	11 U.S.C. § 522(d)(5)
			any applicable statutory limit	
curity Deposit: Citation Club	\$500.00		\$250.00	11 U.S.C. § 522(d)(5)
e from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
deral: Estimated tax return for 2018	\$4,913.05		\$2,456.52	11 U.S.C. § 522(d)(5)
e from <i>Schedule A/B</i> : 28.1			100% of fair market value, up to any applicable statutory limit	
deral: Estimated prorated tax return	\$1,637.68		\$818.84	11 U.S.C. § 522(d)(5)
e from <i>Schedule A/B</i> : 28.2			100% of fair market value, up to any applicable statutory limit	
ate: Estimated income tax refund for	\$956.00		\$318.66	11 U.S.C. § 522(d)(5)
e from <i>Schedule A/B</i> : 28.3			100% of fair market value, up to any applicable statutory limit	
rm life insurance policy through	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
e from <i>Schedule A/B</i> : 31.1			100% of fair market value, up to any applicable statutory limit	
			led on or after the date of adjustme	nt.)
No				
Yes. Did you acquire the property covere ☐ No	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	bit Card: Global Cash Card e from Schedule A/B: 17.2  curity Deposit: Citation Club 600.00) e from Schedule A/B: 22.1  deral: Estimated tax return for 2018 1913.05) e from Schedule A/B: 28.1  deral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  ate: Estimated income tax refund for 18(\$956.00) e from Schedule A/B: 28.3  rm life insurance policy through ployer (no cash value) e from Schedule A/B: 31.1  e you claiming a homestead exemption bject to adjustment on 4/01/22 and every No  Yes. Did you acquire the property covery	portion you own Copy the value from Schedule A/B bit Card: Global Cash Card e from Schedule A/B: 17.2  curity Deposit: Citation Club 600.00) e from Schedule A/B: 22.1  deral: Estimated tax return for 2018 913.05) e from Schedule A/B: 28.1  deral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  deral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  atte: Estimated income tax refund for 18(\$956.00) e from Schedule A/B: 28.3  attern life insurance policy through ployer (no cash value) e from Schedule A/B: 31.1  e you claiming a homestead exemption of more than \$170,35 bject to adjustment on 4/01/22 and every 3 years after that for cannot be property covered by the exemption with the property covered by the exemption of the property covered by the exemption of the property covered by the exemption of the property covered by the	bit Card: Global Cash Card e from Schedule A/B: 17.2  curity Deposit: Citation Club (100.00) e from Schedule A/B: 22.1  cheral: Estimated tax return for 2018 (1913.05) e from Schedule A/B: 28.1  cheral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  cheral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  cheral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  cheral: Estimated prorated tax return 2019 (\$1637.68) e from Schedule A/B: 28.2  cheral: Estimated income tax refund for 18(\$956.00) e from Schedule A/B: 28.3  cheral: Estimated income tax refund for 18 (\$956.00) e from Schedule A/B: 28.3  cheral: Estimated income tax refund for 18 (\$956.00) e from Schedule A/B: 28.3	Dortion you own Copy the value from Schedule A/B: 17.2    S1,300.00   S1,300.00

☐ Yes

Fill in this infor	mation to identify you	ur case:		
Debtor 1		ACT III AT		
	First Name	Middle Name	Last Name	
Debtor 2	Shontavia Tinsle	ey .		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the	: EASTERN DISTRICT O	DF MICHIGAN	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 106C			
	La C. Tha D		Naim on Evenent	
SCHANII	ie C: The P	roberty you (	Claim as Exempt	4/19

the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbank	cruptcy exemptions.	11 U.S	s.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
De	btor 2 Exemptions Utensils (\$50.00), Dining Room furniture(\$100.00), Dresser (\$100.00),	\$3,400.00	•	\$1,700.00	11 U.S.C. § 522(d)(3)
	Bedroom furniture(\$3000.00), Microwave(\$50.00), Lamps and accessories(\$50.00), Cookware(\$50.00) Location: 29924 Meridian Place Apt 21101, Farmington MI 48331 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
	various articles of clothing for debtors (\$200.00)	\$200.00		\$100.00	11 U.S.C. § 522(d)(3)
	Location: 29924 Meridian Place Apt 21101, Farmington MI 48331 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
	Various articles of clothing for Debtor 1 & 2 Children (\$100.00)	\$100.00		\$50.00	11 U.S.C. § 522(d)(3)
	Location: 29924 Meridian Place Apt 21101, Farmington MI 48331 Line from Schedule A/B: 11.2			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 4

Part 1: Identify the Property You Claim as Exempt

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
Constant Action and property	Copy the value from Schedule A/B	Check only one box for each exemption.
Costume Jewelry, Wedding Rings (\$2500.00)	\$2,500.00	\$1,250.00 11 U.S.C. § 522(d)(4)
Line from <i>Schedule A/B</i> : 12.1		☐ 100% of fair market value, up to any applicable statutory limit
Savings: LOC Federal Credit Union Line from Schedule A/B: 17.1	\$1,045.00	\$1,045.00 11 U.S.C. § 522(d)(5)
2.110 110.11 20/2020/07/25 1111		100% of fair market value, up to any applicable statutory limit
Security Deposit: Citation Club (\$500.00)	\$500.00	\$250.00 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 22.1		☐ 100% of fair market value, up to any applicable statutory limit
Federal: Estimated tax return for 2018 (\$4913.05)	\$4,913.05	\$2,456.53 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.1		100% of fair market value, up to any applicable statutory limit
Federal: Estimated prorated tax return for 2019 (\$1637.68)	\$1,637.68	\$818.84 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.2		100% of fair market value, up to any applicable statutory limit
State: Estimated income tax refund for 2018(\$956.00)	\$956.00	\$318.66 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.3		☐ 100% of fair market value, up to any applicable statutory limit
Term life insurance policy through employer (no cash value)	\$0.00	\$0.00 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 31.2		☐ 100% of fair market value, up to any applicable statutory limit
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 ■ No ■ Yes. Did you acquire the property covers	3 years after that for ca	
□ No □ Yes		

Fill in this information to identify your case:						
Debtor 1	Alfonzo Williams					
Debtor 2	First Name Shontavia Tinsley	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT (	OF MICHIGAN			
Case number						Check if this is an amended filing

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Fill in th	his informatio	on to identify your ca	ase:					
Debtor '	1 A	Ifonzo Williams						
	•	rst Name	Middle Na	ime	Last Name			
Debtor 2		hontavia Tinsley						
(Spouse if,	f, filing) Fi	rst Name	Middle Na	ime	Last Name			
United S	States Bankrup	otcy Court for the:	EASTERN D	ISTRICT OF MI	CHIGAN			
Case nu	ımher							
(if known)				-				Check if this is an
								amended filing
O#: a: a	al Carros 4/	OCE /E						
	al Form 10				-l Ol-:			4045
		Creditors Wh				Part 2 for creditors with NONF		12/15
Schedule left. Attac	D: Creditors Web the Continua d case number	Tho Have Claims Secur tion Page to this page.	red by Propert . If you have n	y. If more space i o information to i	is needed, copy	any creditors with partially se the Part you need, fill it out, n do not file that Part. On the to	umber the	entries in the boxes on the
		ave priority unsecured						
	No. Go to Part 2.			-				
ΠY								
Part 2:		Your NONPRIORITY	Unsecured	Claims				
3. Do a	any creditors ha	ave nonpriority unsecu	red claims aga	ainst you?				
	No. You have no	thing to report in this par	t. Submit this fo	orm to the court wi	th your other sch	edules.		
■ Y	res.				•			
unse	ecured claim, list one creditor hol	the creditor separately f	or each claim.	For each claim list	ed, identify what t	b holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured cla	ims already i	included in Part 1. If more
								Total claim
4.1	Approved Ca	ash		Last 4 digits of a	ccount number	Unknown		Unknown
	Nonpriority Cred							
	Redford, MI	even Mile Rd. 48240		When was the de	ebt incurred?	Unknown		_
_		City State Zip Code		As of the date yo	u file, the claim i	is: Check all that apply		
	Who incurred to	the debt? Check one.						
	Debtor 1 onl	ly		☐ Contingent				
	Debtor 2 onl	ly		☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only		☐ Disputed				
	☐ At least one	of the debtors and anoth	her	Type of NONPRIC	ORITY unsecured	d claim:		
	☐ Check if thi	s claim is for a commi	unity	☐ Student loans				
	debt	bject to offset?		Obligations ari	sing out of a sepa	ration agreement or divorce that	at you did no	t
	Is the claim su  ■ No	nject to onset?				g plans, and other similar debts	:	
	■ No □ Yes			•		,	•	
	⊔ res			Other. Specify	ray Day LO	a11		

	Alfonzo Williams     Shontavia Tinsley		Case number (if known)	
4.2	Art Van	Last 4 digits of account number	Unknown	Unknown
	Nonpriority Creditor's Name 6500 14 Mile Rd. Warren, MI 48092	When was the debt incurred?	Unknown	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Loan Deficie	ency	
4.3	Bank of America	Last 4 digits of account number	9158	Unknown
	Nonpriority Creditor's Name 100 N. Tryon St. Charlotte, NC 28255	When was the debt incurred?	Unknown	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	g prants, and onto onto	
4.4	Capital One	Last 4 digits of account number	1029	\$574.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 05/17 Last Active 6/28/17	**
	Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d claim:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	J Claiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	■ Other. Specify Charge Acc	= :	

Debtor 2	Alfonzo Williams     Shontavia Tinsley		Case number (if known)	
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1330	\$465.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 09/16 Last Active 11/03/17	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin  ☐ Other. Specify Credit Card	g plans, and other similar debts	
	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8790	\$316.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 03/17 Last Active 11/03/17	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	3635	\$1,231.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 05/17 Last Active 5/21/18	
_	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		

Debtor 1 Alfonzo Williams Debtor 2 Shontavia Tinsley		Case number (if known)				
4.8 Check 'n Go	Last 4 digits of account number	8331	Unknown			
Nonpriority Creditor's Name 4880 NW 183RD St., Ste. C Opa Locka, FL 33055	When was the debt incurred?	Unknown				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
■ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
☐ Yes	Other. Specify Pay Day Lo	an				
4.9 Comenity Bank/Carsons Nonpriority Creditor's Name	Last 4 digits of account number	1762	\$443.00			
Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 06/17 Last Active 11/12/17				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	-					
☐ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
$\square$ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Charge Acc	count				
4.1 Comenity Bkl/Ulta	Last 4 digits of account number	2121	\$568.00			
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 09/17 Last Active 8/02/18				
Columbus, OH 43218  Number Street City State Zip Code	As of the date was file the plain.	: OL				
Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
Debtor 1 only	Continuent					
■ Debtor 2 only	<del>-</del>	☐ Contingent ☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	·	☐ Disputed  Type of NONPRIORITY unsecured claim:				
☐ At least one of the debtors and another						
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
☐ Yes	■ Other. Specify Charge Acc	count				
	— Suitori Specify					

Alfonzo Williams Shontavia Tinsley	Case number (if known)		
Credit Acceptance	Last 4 digits of account number	3708	\$10,092.00
Ionpriority Creditor's Name 15505 West 12 Mile Rd Suite 3000	When was the debt incurred?	Opened 06/16 Last Active 3/22/18	
lumber Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
ebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Automobile		
Credit Collection Services	Last 4 digits of account number	1162	\$231.00
attn: Bankruptcy 25 Canton St	When was the debt incurred?	Opened 1/02/18	
Norwood, MA 02062  Iumber Street City State Zip Code  Vho incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
_	=		
_	_ `		
	•	d claim:	
	☐ Student loans		
ebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify 06 Progress	sive	
Department of Education/Nelnet	Last 4 digits of account number	9265	\$14,731.00
attn: Claims Po Box 82505	When was the debt incurred?	Opened 08/13 Last Active 3/31/19	
lumber Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
_	☐ Contingent		
Debtor 2 only			
_			
<u>_</u>	•	d claim:	
Check if this claim is for a community	Student loans		
ebt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
s the claim subject to offset?		ng plans, and other similar debts	
	conpriority Creditor's Name 15505 West 12 Mile Rd Suite 3000 Southfield, MI 48034 Sumber Street City State Zip Code Indicated the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another Check if this claim is for a community ebt Sthe claim subject to offset?  No Yes  Credit Collection Services Conpriority Creditor's Name Attn: Bankruptcy 25 Canton St Corwood, MA 02062 Sumber Street City State Zip Code Indicated the debtors and another Check if this claim is for a community composite to the debtors and another Check if this claim is for a community community creditor's name Attn: Claim subject to offset? No Yes  Credit Collection Services Compriority Creditor's Name Construction of the debtors and another Check if this claim is for a community control of the claim subject to offset? No Yes  Copartment of Education/Nelnet Conpriority Creditor's Name Cotton Nelnet Cotton	Contingent   Con	compriority Creditor's Name S505 West 12 Mile Rd butte 3000 Journhield, MI 48034  Joebtor 1 only  Credit Collection Services Compriority Creditor's Name Utth: Bankruptcy 25 Canton St Lorwood, MA 02062  Joebtor 1 only  Debtor 2 only  Debtor 1 only

ebtor 1 Alfonzo Williams ebtor 2 Shontavia Tinsley		Case number (if known)		
Department of Education/Nelnet	Last 4 digits of account number	0561	\$12,789.00	
Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/12 Last Active 3/31/19		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify			
	Educational			
Department of Education/Nelnet  Nonpriority Creditor's Name	Last 4 digits of account number	7465	\$9,361.00	
Attn: Claims Po Box 82505	When was the debt incurred?	Opened 08/14 Last Active 3/31/19		
Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify			
	Educational			
Department of Education/Nelnet  Nonpriority Creditor's Name	Last 4 digits of account number	8274	\$4,657.00	
Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/09 Last Active 3/31/19		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	☐ Other. Specify Educational			

	or 1 Alfonzo Williams or 2 Shontavia Tinsley		Case number (if known)	
4.1 7	Department of Education/Nelnet	Last 4 digits of account number	8074	\$4,584.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/10 Last Active 3/31/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educational		
4.1 8	Department of Education/Nelnet  Nonpriority Creditor's Name	Last 4 digits of account number	1461	\$4,563.00
	Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/11 Last Active 3/31/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a separeport as priority claims</li></ul>		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify		
		Educational		
4.1 9	Department of Education/Nelnet	Last 4 digits of account number	0274	\$3,707.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 06/09 Last Active 3/31/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another		a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educational		

	or 1 Alfonzo Williams or 2 Shontavia Tinsley		Case number (if known)		
4.2 0	Department of Education/Nelnet	Last 4 digits of account number	0074	\$3,631.00	
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/08 Last Active 3/31/19		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent ☐ Unliquidated			
	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
		Educational			
4.2 1	Department of Education/Nelnet  Nonpriority Creditor's Name	Last 4 digits of account number	0661	\$3,503.00	
	Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/12 Last Active 3/31/19		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a separeport as priority claims</li></ul>	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin			
	☐ Yes	Other. Specify			
		Educational			
4.2	Department of Education/Nelnet	Last 4 digits of account number	5261	\$2,194.00	
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 05/12 Last Active 3/31/19		
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed	d alata.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured  Student loans	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify			
		Educational			

	r 1 Alfonzo Williams r 2 Shontavia Tinsley		Case number (if known)	
4.2	Department of Education/NeInet  Nonpriority Creditor's Name	Last 4 digits of account number	8174	\$1,911.00
	Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/10 Last Active 3/31/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educational		
4.2				
4	Department of Education/Nelnet	Last 4 digits of account number		\$1,037.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505	When was the debt incurred?	Opened 06/09 Last Active 3/31/19	
	Lincoln, NE 68501  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	☐ Other. Specify		
		Educational		
1.2	Deptartment Store National Bank/Macy's	Last 4 digits of account number	4730	\$361.00
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard	When was the debt incurred?	Opened 09/17 Last Active 10/13/17	
	Mason, OH 45040  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	u Claiiii.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	ount	

Debto	r 2 Shontavia Tinsley		Case number (if known)	
.2	First Premier Bank	Last 4 digits of account number	3855	\$430.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/12 Last Active 3/10/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card		
2	Jefferson Capital Systems, LLC	Last 4 digits of account number	8269	\$147.00
	Nonpriority Creditor's Name Po Box 1999	When was the debt incurred?	Opened 10/17	
	Saint Cloud, MN 56302 Number Street City State Zip Code	As of the date you file, the claim i	<u>·</u>	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Factoring C	ompany Account Dte Energy	
2	Kohls/Capital One	Last 4 digits of account number	9444	\$546.00
	Nonpriority Creditor's Name	Last 4 digits of account number		ψο-το.ου
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 09/17 Last Active 4/28/18	
	Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	u Ciaiill.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	or plans, and other similar debts	
		·		
	☐ Yes	Other. Specify Charge Acc	ount	

	or 1 Alfonzo Williams or 2 Shontavia Tinsley		Case number (if known)		
4.2 9	Kohls/Capital One	Last 4 digits of account number	5182	\$444.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 03/17 Last Active 11/03/17		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Charge Acc	ount		
4.3	LVNV Funding/Resurgent Capital  Nonpriority Creditor's Name	Last 4 digits of account number	3221	\$285.00	
	Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 10/16		
	Greenville, SC 29603  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other. Specify Factoring C Fingerhut	ompany Account Metabank		
4.3 1	Merchants & Medical Credit Corp  Nonpriority Creditor's Name	Last 4 digits of account number	3228	\$55.00	
	Attn: Bankruptcy 6324 Taylor Drive Flint, MI 48507	When was the debt incurred?	Opened 09/15		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed				
	$\square$ At least one of the debtors and another	<u></u>	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	— 110		ttorney Hutzel Womens Health		
	□Yes	Other. Specify Specialis			

or 2 Shontavia Tinsley		Case number (if known)	
Michigan Dept of Human Services	Last 4 digits of account number	3385	\$3,307.00
Nonpriority Creditor's Name Welfare Debt Unit PO Box 30025	When was the debt incurred?	2018	
Lansing, MI 48909  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	■ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Food Stamp	o Program	
Nelnet		6774	\$1,667.00
Nonpriority Creditor's Name	Last 4 digits of account number		\$1,007.00
Attn: Claims Po Box 82505	When was the debt incurred?	Opened 06/08 Last Active 3/31/19	
Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
<u> </u>	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
☐ Check if this claim is for a community debt  Is the claim subject to offset?			
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	☐ Other. Specify		
Li Tes	Educational		
Portfolio Recovery	Last 4 digits of account number	1508	\$805.00
Nonpriority Creditor's Name Po Box 41021 Norfolk, VA 23541	When was the debt incurred?	Opened 10/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	Other, Specify Factoring Company Account Comenity Bank		

or 2 Shontavia Tinsley		Case number (if known)	
Portfolio Recovery	Last 4 digits of account number	6813	\$702.00
Nonpriority Creditor's Name Po Box 41021	When was the debt incurred?	Opened 10/18	
Norfolk, VA 23541  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Factoring C	ompany Account Comenity Bank	
Portfolio Recovery	Last 4 digits of account number	1247	\$530.00
Nonpriority Creditor's Name Po Box 41021	When was the debt incurred?	Opened 10/18	
Norfolk, VA 23541  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only			
	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alatas	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
☐ Check if this claim is for a community debt			
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing	og plane, and other similar debte	
Yes	Other. Specify Factoring C	ompany Account Comenity Bank	
Portfolio Recovery	Last 4 digits of account number	1762	\$443.00
Nonpriority Creditor's Name Po Box 41021 Norfolk, VA 23541	When was the debt incurred?	Opened 08/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
$\square$ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not		
	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
■ No			
☐ Yes	Other. Specify Factoring Company Account Comenity Bank		

otor 2 Shontavia Tinsley		Case number (if known)	
Portfolio Recovery	Last 4 digits of account number	9403	\$402.00
Nonpriority Creditor's Name Po Box 41021 Norfolk, VA 23541	When was the debt incurred?	Opened 10/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Factoring C	ompany Account Comenity Bank	
Progressive Leasing	Last 4 digits of account number	Unknown	Unknow
Nonpriority Creditor's Name 256 W. Data Dr.	When was the debt incurred?	Unknown	
Draper, UT 84020  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Lease Deficiency		
TekCollect Inc	Last 4 digits of account number	9216	\$246.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1269	When was the debt incurred?	Opened 05/18	
Columbus, OH 43216  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Collection Attorney Primecare Urgentcare		

Debtor 2	Alfonzo Williams Shontavia Tinsley		Case number (if known)	
	U.S. Department of Education	Last 4 digits of account number	0532	\$4,481.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 10/13 Last Active 2/03/19	-
Number Street City State Zip Code		As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	ed claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	_	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-shar	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa	al	-
	U.S. Department of Education  Nonpriority Creditor's Name	Last 4 digits of account number	0531	\$4,147.00
	Ecmc/Bankruptcy Po Box 16408	When was the debt incurred?	Opened 01/14 Last Active 2/03/19	-
	Saint Paul, MN 55116  Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	☐ Yes	Other. Specify		_
		Educationa	al	
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		
is tryin have m	s page only if you have others to be notified g to collect from you for a debt you owe to s ore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agenc	y here. Similarly, if you
	d Address	On which entry in Part 1 or Part 2 did yo	_	
Capital	One Capital One Dr		Part 1: Creditors with Priority Unsecured Cla	
	ond, VA 23238		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
			u list the original creditor?  Part 1: Creditors with Priority Unsecured Cla  Part 2: Creditors with Nonpriority Unsecured	
, CIOI IIII	7114, VI LOLOU	Last 4 digits of account number		
Capital 15000	d Address One Capital One Dr ond, VA 23238		u list the original creditor?  Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured	
		Last 4 digits of account number		
Name an	d Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Alfonzo Williams Debtor 2 Shontavia Tinsley		Case number (if known)
Chase Card Services Po Box 15298 Wilmington DE 10850	Line 4.7 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington, DE 19850	Last 4 digits of account number	
Name and Address Comenity Bkl/Ulta Po Box 182120 Columbus, OH 43218	On which entry in Part 1 or Part 2 did y Line 4.10 of ( <i>Check one</i> ):  Last 4 digits of account number	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Credit Acceptance Po Box 513 Southfield, MI 48037	Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Credit Collection Services Po Box 607 Norwood, MA 02062	On which entry in Part 1 or Part 2 did y Line 4.12 of ( <i>Check one</i> ):  Last 4 digits of account number	rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address		Use the original analyses
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.13 of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Autora, CO 50014	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.14 of ( <i>Check one</i> ):	rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
7,41,614, 50, 50, 11	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.15 of (Check one):	rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one):	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.17 of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.18 of ( <i>Check one</i> ):  Last 4 digits of account number	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.19 of ( <i>Check one</i> ):  Last 4 digits of account number	rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did y Line 4.20 of ( <i>Check one</i> ):	rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Alfonzo Williams Debtor 2 Shontavia Tinsley		Case number (if known)
	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd	On which entry in Part 1 or Part 2 did Line 4.21 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Aurora, CO 80014	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did Line 4.22 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did Line $\underline{4.23}$ of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014	On which entry in Part 1 or Part 2 did Line 4.24 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Deptartment Store National Bank/Macy's Po Box 8218 Mason, OH 45040	On which entry in Part 1 or Part 2 did Line 4.25 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	
Name and Address First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	On which entry in Part 1 or Part 2 did Line $\underline{4.26}$ of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Jefferson Capital Systems, LLC 16 Mcleland Rd Saint Cloud, MN 56303	On which entry in Part 1 or Part 2 did Line $\underline{4.27}$ of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	On which entry in Part 1 or Part 2 did Line $\underline{4.28}$ of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	On which entry in Part 1 or Part 2 did Line $\underline{4.29}$ of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	
Name and Address LVNV Funding/Resurgent Capital Po Box 1269	On which entry in Part 1 or Part 2 did Line $\underline{4.30}$ of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Greenville, SC 29602	Last 4 digits of account number	
Name and Address Merchants & Medical Credit Corp 6324 Taylor Dr Flint, MI 48507	On which entry in Part 1 or Part 2 did Line 4.31 of ( <i>Check one</i> ):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

	Total Claim
Total the amounts of certain types of unsecured claims. This information is fo type of unsecured claim.	r statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
Part 4: Add the Amounts for Each Type of Unsecured Claim	
Greenville, TX 75403  Last 4 digits of account num	
Po Box 5609	■ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address  On which entry in Part 1 or U.S. Department of Education  Line 4.42 of (Check one):	Part 2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account num	iber
Po Box 5609 Greenville, TX 75403	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address On which entry in Part 1 or U.S. Department of Education Line 4.41 of (Check one):	Part 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account num	
Pob 1269 Columbus, OH 43216	■ Part 2: Creditors with Nonpriority Unsecured Claims
TekCollect Inc Line $\underline{4.40}$ of (Check one):	Part 2 did you list the original creditor?  — Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account num  Name and Address  On which entry in Part 1 or	
Mount Clemens, MI 48046	■ Part 2: Creditors with Nonpriority Unsecured Claims
Roosen Varchetti & Olivier  P.O. Box 2305  Cit Wild Gally Will at 1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
	Part 2 did you list the original creditor?
Norfolk, VA 23502  Last 4 digits of account num	
Portfolio Recovery Line <u>4.38</u> of ( <i>Check one</i> ): 120 Corporate Blvd Ste 1	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Part 2 did you list the original creditor?
Norfolk, VA 23502  Last 4 digits of account num	ber
120 Corporate Blvd Ste 1	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address On which entry in Part 1 or Portfolio Recovery Line 4.37 of (Check one):	Part 2 did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account num	ber
120 Corporate Blvd Ste 1 Norfolk, VA 23502	■ Part 2: Creditors with Nonpriority Unsecured Claims
Portfolio Recovery Line <u>4.36</u> of ( <i>Check one</i> ):	Part 2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account num	
Norfolk, VA 23502	■ Part 2: Creditors with Nonpriority Unsecured Claims
Portfolio Recovery  120 Corporate Blvd Ste 1	☐ Part 1: Creditors with Priority Unsecured Claims
	Part 2 did you list the original creditor?
Norfolk, VA 23502  Last 4 digits of account num	
Portfolio Recovery Line <u>4.34</u> of ( <i>Check one</i> ): 120 Corporate Blvd Ste 1	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Part 2 did you list the original creditor?
Aurora, CO 80014  Last 4 digits of account num	ber
3015 S Parker Rd	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address On which entry in Part 1 or Nelnet Line 4.33 of (Check one):	Part 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims

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Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Alfonzo Williams Debtor 2 Shontavia Tinsley Case number (if known) Claims for death or personal injury while you were intoxicated 6c. 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 0.00 6d. 6d. Total Priority. Add lines 6a through 6d. 0.00 6e. Total Claim 6f. Student loans 6f. 76,963.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 22,623.00 Total Nonpriority. Add lines 6f through 6i. 6j. 99,586.00

Fill in this inform						
Debtor 1	Alfonzo Williams					
	First Name	Middle Name	Last Name			
Debtor 2	Shontavia Tinsley					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT C	DF MICHIGAN			
Case number						
(if known)					☐ Check if	this is an
					amende	d filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Citation Club Apartments 29540 Citation Club Circle Farmington, MI 48331	Apartment Lease
2.2	Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161	Opened 08/17 Lease of 2017 1500 Ram
2.3	Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161	Opened 8/24/17 Lease of 2018 Compass

Fill in thi	s information to identify your o	ase:			
Debtor 1	Alfonzo Williams				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	Shontavia Tinsley First Name	Middle Nome	Lost Nome		
	3,	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN		
Case nur	mber				
(if known)					☐ Check if this is an amended filing
					amended ming
Officia	al Form 106H				
Sche	dule H: Your Code	ebtors			12/15
fill it out, your nam	and number the entries in the le and case number (if known).	boxes on the left. Attach Answer every question	n the Additional Page to	this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
1. DO	you have any codebtors? (If y	bu are filing a joint case, o	do not list either spouse a	is a codeptor.	
■ Ye	es				
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,				
■ No	o. Go to line 3.				
□ Ye	es. Did your spouse, former spou	se, or legal equivalent live	e with you at the time?		
in lir Forn	e 2 again as a codebtor only if	that person is a guaran	tor or cosigner. Make s	ure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor				editor to whom you owe the debt
	Name, Number, Street, City, State and ZIF	Code		Check all schedul	es that apply:
				_	
3.1	Shontavia Tinsley 29924 Meridian Place 21101	1		☐ Schedule D, I	
	Farmington, MI 48331			■ Schedule E/F □ Schedule G	
				Art Van	<del></del>
0.5	O				
3.2	Shontavia Tinsley 29924 Meridian Place 21101	1		☐ Schedule D, I	<del></del>
	Farmington, MI 48331			■ Schedule E/F	
	•			☐ Schedule G _ Progressive Lea	
				1 Togrossive Lea	S9

Fill i	n this information to	o identify your case:		
Deb	tor 1	Alfonzo Williams		
	otor 2 use, if filing)	Shontavia Tinsley		
Unit	ed States Bankrup	tcy Court for the: EASTERN DISTRICT	OF MICHIGAN	
Cas (If kno	e number			Check if this is:  An amended filing  A supplement showing postpetition chapter
Of	ficial Form	1061		13 income as of the following date:  MM / DD/ YYYY
Sc	chedule I:	Your Income		12/15
supp spou attac	olying correct infouse. If you are sepended a separate sheet	rmation. If you are married and not filing parated and your spouse is not filing wit et to this form. On the top of any addition	g jointly, and your spouse is livi th you, do not include informatio	and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question.
Part		e Employment		
1.	Fill in your emploinformation.	oyment	Debtor 1	Debtor 2 or non-filing spouse
	If you have more	than one job,	■ Employed	■ Employed

■ Not employed ■ Not employed information about additional employers. Occupation Shipping Clerk Include part-time, seasonal, or Global Horizon **Employer's name** Medical Resources Group self-employed work. **Employer's address** Occupation may include student Horizon Global Americas Inc or homemaker, if it applies. 2600 W. Big Beaver Road 28000 Dequindre Road Suite 555 Warren, MI 48092 Troy, MI 48084 How long employed there? 2.5 years 2.5 years

**Employment status** 

Part 2: Give Details About Monthly Income

attach a separate page with

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,750.00 \$ 2,818.53

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 3,750.00 \$ 2,818.53

Debtor 1 Alfonzo Williams
Debtor 2 Shontavia Tinsley

Case number (if known)

				F	or Debtor 1	For Debtor 2 or non-filing spouse			
	Copy	y line 4 here	4.	\$	3,750.00	\$		,818.53	3
								,	_
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	524.92	\$		403.98	3
	5b.	Mandatory contributions for retirement plans	5b.	\$		\$		0.00	)
	5c.	Voluntary contributions for retirement plans	5c.	\$		\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$		\$		0.00	_
	5e.	Insurance	5e.	\$		\$		195.89	_
	5f.	Domestic support obligations	5f.	\$ \$		\$		0.00	_
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	,	0.00	\$ + \$		0.00	_
•			_						_
6. 7.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  ulate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.	\$ \$	972.32	\$ \$		599.87	_
			7.	Φ	2,777.68	Φ	2	,218.66	<u> </u>
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total	0.0	¢.	0.00	¢		0.00	
	8b.	monthly net income.  Interest and dividends	8a. 8b.	\$ \$		\$ \$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent	ob.	φ	0.00	φ		0.00	<u>'</u>
	00.	regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.	\$		\$		0.00	_
	8d.	Unemployment compensation	8d.	\$		\$		0.00	_
	8e.	Social Security Other government assistance that you regularly receive	8e.	\$	0.00	\$		0.00	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	_	Specify:	8f.	\$		\$		0.00	_
	8g.	Pension or retirement income	8g.	\$	- 0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$		0.00	) 
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		0.0	0
10	Calc	ulate monthly income. Add line 7 + line 9.	0. \$		2,777.68 + \$		2,218.66	= \$	4,996.34
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			2,777.00		2,210.00		1,000.01
11.	State Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your or friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a	depen				n Schedul	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain es						\$	4,996.34
								Combi	
13	Do v	ou expect an increase or decrease within the year after you file this form?	,					month	ly income
	<b>=</b>	No.							
	_	Yes. Explain:							
	_								

	in this informa	ation to identify y	2115 22221							
	otor 1	ation to identify yo Alfonzo Willia				Chack	; if this is:			
	7.01	Allonzo vvilla	11115			☐ An amended filing				
	otor 2 ouse, if filing)	Shontavia Tir	nsley			A supplement showing postpetition chapter 13 expenses as of the following date:				
Unit	ted States Bank	ruptcy Court for the	EASTE	RN DISTRICT OF MICHIG	SAN	N	MM / DD / YYYY			
	se number nown)									
		orm 106J • <b>J: Your</b>	Exper	ıses				12/15		
Be	as complete ormation. If m	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this						
		ribe Your House	ehold							
1.	Is this a join  ☐ No. Go to	o line 2.	:	ata hawada aldQ						
	■ N	-		ial Form 106J-2, <i>Expenses</i>	s for Separate House	<i>hold</i> of Debto	or 2.			
2.	Do you hav	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?		
	Do not state dependents				Son		14	□ No ■ Yes		
					Son		17	□ No ■ Yes		
								□ No □ Yes		
								□ No		
3.	Do your ex	penses include		No				☐ Yes		
	•	of people other t ad your depende	han $_{\square}$	Yes						
Est	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y sy is filed. If this is a supp						
the		h assistance an		government assistance i			Your exp	enses		
4.		or home owners nd any rent for th		nses for your residence. I or lot.	nclude first mortgage	4. \$		1,444.00		
	If not include	ded in line 4:								
	4a. Real	estate taxes				4a. \$		0.00		
	•	erty, homeowner's				4b. \$		12.00		
		e maintenance, re eowner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00		
5.	Additional	mortgage paym	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00		

Del	otor 1	Alfonzo Williams			
	otor 2	Shontavia Tinsley	Case num	ber (if known)	
				-	
6.	Utilit		0-	œ.	175.00
	6a.	Electricity, heat, natural gas	6a.	·	175.00
	6b.	Water, sewer, garbage collection	6b.	•	50.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	•	375.00
7	6d.	Other. Specify:	6d.		0.00
7. 8.		d and housekeeping supplies dcare and children's education costs	7. 8.	\$ \$	785.00
9.	-	hing, laundry, and dry cleaning	9.		0.00
		sonal care products and services	10.	·	250.00 75.00
		ical and dental expenses	11.	*	50.00
		sportation. Include gas, maintenance, bus or train fare.		Ψ	30.00
12.		not include car payments.	12.	\$	350.00
13.		ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Cha	ritable contributions and religious donations	14.	\$	0.00
15.	Insu	rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.		_	
		Life insurance	15a.	·	0.00
		Health insurance	15b.	•	0.00
		Vehicle insurance	15c.	*	225.00
		Other insurance. Specify:	15d.	\$	0.00
16.	Taxe Spec	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
17.		allment or lease payments:		·	0.00
		Car payments for Vehicle 1	17a.	\$	360.00
	17b.	Car payments for Vehicle 2	17b.	\$	650.00
	17c.	Other. Specify:	17c.	\$	0.00
	17d.	Other. Specify:	17d.	\$	0.00
18.		r payments of alimony, maintenance, and support that you did not report as	10	•	0.00
40	dedu	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$ ———	
19.		er payments you make to support others who do not live with you.	19.	Φ	0.00
20	Spec	तापुर. er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Income	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	· -	0.00
		Property, homeowner's, or renter's insurance	20c.	•	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
		Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	er: Specify: Schools supplies	21.	+\$	16.50
22.		culate your monthly expenses		•	4.047.50
		Add lines 4 through 21.		\$	4,917.50
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		<b>3</b>	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	4,917.50
23.		ulate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.		4,996.34
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,917.50
	00				
	23C.	Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23c.	\$	78.84
				<u> </u>	
24.		ou expect an increase or decrease in your expenses within the year after yo			
		xample, do you expect to finish paying for your car loan within the year or do you expect you fication to the tarms of your mortgage?	r mortgage	payment to increas	se or decrease because of a
		fication to the terms of your mortgage?			
	■ N				
	ПΥ	es. Explain here:			

Fill in th	is informa	ation to identify your o	ase:					
Debtor 1		Alfonzo Williams						
		First Name	Middle Name	Las	st Name			
Debtor 2		Shontavia Tinsley						
(Spouse if,	filing)	First Name	Middle Name	Las	st Name			
United S	States Bank	kruptcy Court for the:	EASTERN DISTRIC	CT OF MICHIGA	۸N			
Case nu	mber						_	
(if known)								•
								amended filing
If two ma You mus obtaining	arried peo et file this f g money c both. 18	ple are filing together, form whenever you fil or property by fraud in U.S.C. §§ 152, 1341, 15	both are equally re e bankruptcy sched connection with a	esponsible for s	supplyi	ng correct information edules. Making a false result in fines up to \$25	statement, co	oncealing property, or prisonment for up to 20
	Sign I	Below						
Did	l you pay	or agree to pay somed	one who is NOT an a	attorney to help	you fi	II out bankruptcy forms	s?	
	No							
	Yes. Na	me of person						Petition Preparer's Notice, Inature (Official Form 119)
						Declar	alion, and Sig	nature (Onicial Form 119)
		of perjury, I declare true and correct.	hat I have read the	summary and s	chedu	les filed with this decla	ration and	
х	/s/ Alfonz	zo Williams		Х	/s/ Sł	hontavia Tinsley		
-	Alfonzo V	Villiams		<del></del>		ntavia Tinsley		
	Signature	of Debtor 1			Signa	ture of Debtor 2		
	Date Ap	oril 16, 2019			Date	April 16, 2019		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill i	n this inforn	nation to identify you	r case:			
Deb	tor 1	Alfonzo Williams				
		First Name	Middle Name	Last Name		
Debt	tor 2 ise if, filing)	Shontavia Tinsley	/ Middle Name	Last Name		
.		nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
	od Otatos Bai	initiapitoy Court for the.	ENOTERIT DIOTRIOT OF	WHOTHO, IIV		
Case (if kno	e number <sub>own)</sub>				ПС	neck if this is an
					an	nended filing
Off	icial Fo	rm 107				
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
Be as	s complete a	and accurate as possi	ble. If two married people a	are filing together, both are	equally responsible for supp	lying correct
infor	mation. If m		attach a separate sheet to		/ additional pages, write you	
Part	Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	is?			
	Married					
	□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ N.					
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	'.	
		ior Address:	Dates Debtor 1	Debtor 2 Prior Ac		Dates Debtor 2
	Debitor 111	ioi Address.	lived there	Debtor 21 Hor Ac	ui ess.	lived there
3.	Within the la	ast 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property
					co, Texas, Washington and Wi	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Evolai	n the Sources of You	r Incomo			
ган	Ехріаі	ii tile Sources or Tou	- Income			
					ear or the two previous calen	dar years?
			u received from all jobs and a have income that you receiv			
	□ No					
	_	in the details.				
	<b>—</b> 163.1111	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
				exclusions)		and exclusions)
		of current year until	■ Wages, commissions,	\$9,313.45	■ Wages, commissions,	\$6,923.08
tne (	uate you file	d for bankruptcy:	bonuses, tips		bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

		onzo Williams ontavia Tinsley		Case	e number (if known)	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calend nuary 1 to [	dar year: December 31, 2	Wages, commissions, bonuses, tips	\$35,405.13	■ Wages, commissions, bonuses, tips	\$34,619.00
			☐ Operating a business		☐ Operating a business	
		lar year before t December 31, 2		\$0.00	■ Wages, commissions, bonuses, tips	\$31,201.00
			☐ Operating a business		☐ Operating a business	
	■ No	odice and the gr	oss income from each source separa	ately. Do not include income ti	iat you listed in line 4.	
		Fill in the details.	Debtor 1		Dobtor 2	
		Fill in the details.	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Part	:3: List		Sources of income	each source (before deductions and exclusions)	Sources of income	(before deductions
6.	Are either ☐ No.	Certain Paymer  Debtor 1's or D  Neither Debtor individual prima  During the 90 da	Sources of income Describe below.  Ints You Made Before You Filed for Bebtor 2's debts primarily consume 1 nor Debtor 2 has primarily considerately for a personal, family, or househout anys before you filed for bankruptcy, of to line 7.  below each creditor to whom you pad that creditor. Do not include payment include payments to an attorney for justment on 4/01/22 and every 3 year	each source (before deductions and exclusions)  Bankruptcy  er debts?  sumer debts. Consumer debts old purpose."  did you pay any creditor a total aid a total of \$6,825* or more it ents for domestic support oblig this bankruptcy case.  rs after that for cases filed on	Sources of income Describe below.  s are defined in 11 U.S.C. § 10  I of \$6,825* or more?  In one or more payments and to ations, such as child support a	(before deductions and exclusions)  21(8) as "incurred by an the total amount you and alimony. Also, do
6.	Are either ☐ No. ☐ No. ☐ Yes.	Certain Paymer  Debtor 1's or D  Neither Debtor individual prima  During the 90 da  No. Go  Yes List paid not * Subject to ad  Debtor 1 or De	Sources of income Describe below.  Ints You Made Before You Filed for Bebtor 2's debts primarily consume 1 nor Debtor 2 has primarily considering for a personal, family, or househouse before you filed for bankruptcy, or to line 7.  below each creditor to whom you pad that creditor. Do not include paymenticlude payments to an attorney for	each source (before deductions and exclusions)  Bankruptcy  er debts?  sumer debts. Consumer debts old purpose."  did you pay any creditor a total aid a total of \$6,825* or more is ents for domestic support oblighthis bankruptcy case. rs after that for cases filed on umer debts.	Sources of income Describe below.  s are defined in 11 U.S.C. § 10  of \$6,825* or more?  n one or more payments and tations, such as child support a or after the date of adjustment	(before deductions and exclusions)  21(8) as "incurred by an the total amount you and alimony. Also, do
6.	Are either ☐ No. ☐ Yes.	Certain Paymer  Debtor 1's or D  Neither Debtor individual prima  During the 90 da  No. Go  Yes List paid not * Subject to adj  Debtor 1 or Del  During the 90 da	Sources of income Describe below.  Ints You Made Before You Filed for Bebtor 2's debts primarily consume 1 nor Debtor 2 has primarily considerately for a personal, family, or househout anys before you filed for bankruptcy, or to line 7.  below each creditor to whom you pad that creditor. Do not include payment include payments to an attorney for justment on 4/01/22 and every 3 year btor 2 or both have primarily cons	each source (before deductions and exclusions)  Bankruptcy  er debts?  sumer debts. Consumer debts old purpose."  did you pay any creditor a total aid a total of \$6,825* or more is ents for domestic support oblighthis bankruptcy case. rs after that for cases filed on umer debts.	Sources of income Describe below.  s are defined in 11 U.S.C. § 10  of \$6,825* or more?  n one or more payments and tations, such as child support a or after the date of adjustment	(before deductions and exclusions)  21(8) as "incurred by an the total amount you and alimony. Also, do

**Creditor's Name and Address** 

**Dates of payment** 

**Total amount** paid

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

attorney for this bankruptcy case.

	otor 1 otor 2	Alfonzo Williams Shontavia Tinsley		Cas	e number (if known)		
	Inside of whi	n 1 year before you filed for bankrupters include your relatives; any general pach you are an officer, director, person in iness you operate as a sole proprietor.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner or more of their voting	erships of which you	ou are a general iny managing ag	partner; corporations ent, including one for
		No ∕es. List all payments to an insider.					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	nis payment
	inside Includ	n 1 year before you filed for bankrupt er? le payments on debts guaranteed or cos		ments or transfer a	nny property on a	account of a del	ot that benefited an
		Yes. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Par	t 4:	Identify Legal Actions, Repossessio	ns. and Foreclosures				
	List al modifi	n 1 year before you filed for bankrupt I such matters, including personal injury ications, and contract disputes.  No Yes. Fill in the details.		s, divorces, collection			
	Case	e title e number	Nature of the case	Court or agency		Status of the	case
	Cred	lit Acceptance v Alfonzo Lamar	Collection	36th District Cou 421 Madison Detroit, MI 4822		☐ Pending ☐ On appea ☐ Conclude	
10.	Check ■ N □ Y	n 1 year before you filed for bankrupt call that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.	Describe the Property		oreclosed, garni Date		seized, or levied?  Value of the property
11.	accol	n 90 days before you filed for bankru unts or refuse to make a payment bed No (es. Fill in the details.	ptcy, did any creditor, inc		nancial institutio	n, set off any an	nounts from your
		litor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
	court-	n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a No /es		erty in the possessi	ion of an assigne	ee for the benef	it of creditors, a

	tor 1 Alfonzo Williams tor 2 Shontavia Tinsley			Case number	(if known)		
Part	5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No  Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	C	Describe the gifts		Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptc ■ No			ns with a tota	l value of more than	\$600 to any charity?	
	Yes. Fill in the details for each gift or contril				_		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	C	Describe what you contributed		Dates you contributed	Value	
Part	6: List Certain Losses						
	Within 1 year before you filed for bankruptcy or gambling?  No	or sir	nce you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,	
	Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred  Describe any insurance coverage fo Include the amount that insurance has insurance claims on line 33 of Schedul			ist pending	Date of your loss	Value of property lost	
Part	7: List Certain Payments or Transfers						
	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepared any attorneys, bankruptcy petition prepared to the consulted any attorneys, bankruptcy petition prepared to the consulted and the consu	aring	a bankruptcy petition?		, ,	rty to anyone you	
	■ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	4.	Description and value of any prop ransferred	erty	Date payment or transfer was made	Amount of payment	
	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor:				or transfer any prope	rty to anyone who	
	Do not include any payment or transfer that you listed on line 16.						
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any prop ransferred	erty	Date payment or transfer was made	Amount of payment	
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.						
	■ No □ Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made	
	Person's relationship to you			paid III ex	onange		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

	otor 1 Alfonzo Williams otor 2 Shontavia Tinsley			Case nu	mber (if known)		
1	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No						
	Yes. Fill in the details.  Name of trust	Description a	nd value of the pro	operty tran	nsferred	Date Transfer was	
	Name of trust	Description at	na value of the pro	operty trai	isierieu	made	
Part	t 8: List of Certain Financial Accounts,	Instruments, Safe Dep	osit Boxes, and S	Storage Un	its		
: ! !	Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money marke houses, pension funds, cooperatives, as:  No  Yes. Fill in the details.	t, or other financial acc	counts; certificate	s of depos	•	•	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
-	Chase Bank	<b>XXXX</b> -6583	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		2/2019	\$0.00	
-	Bank of America	xxxx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		8/2018	\$3,000.00	
	cash, or other valuables?	1 year before you filed	d for bankruptcy, a	any safe d	eposit box or other depo	sitory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had Address (Numb State and ZIP Cod	per, Street, City,	Describ	e the contents	Do you still have it?	
22.	Have you stored property in a storage un	it or place other than y	our home within	1 year befo	ore you filed for bankrup	otcy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code			Describ	e the contents	Do you still have it?	
Part	t 9: Identify Property You Hold or Cont	rol for Someone Else					
	Do you hold or control any property that for someone.	someone else owns? l	Include any prope	rty you bo	errowed from, are storing	g for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code	Where is the p (Number, Street, C Code)		Describ	e the property	Value	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Alfonzo Williams Debtor 2 Shontavia Tinsley

Case number (if known)

Part 10:	Give Details About Environmental Information
----------	--

For the purpose of Part 10, the following definitions apply:

	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	Have you notified any governmental unit of any release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pa	t 11: Give Details About Your Business or Co	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	ny of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing execu	utive of a corporation					
	☐ An owner of at least 5% of the voting o	r equity securities of a corporation					
No. None of the above applies. Go to Part 12.							

Official Form 107

**Business Name** 

(Number, Street, City, State and ZIP Code)

Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the nature of the business

Name of accountant or bookkeeper

page 6

Yes. Check all that apply above and fill in the details below for each business.

**Employer Identification number** 

Dates business existed

Do not include Social Security number or ITIN.

Debto Debto				Case number (if known)
	Within 2 years before you filed for bankrup nstitutions, creditors, or other parties.	otcy, did you give	a financial statement	to anyone about your business? Include all financial
1 0	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part	12: Sign Below			
are tru with a 18 U.S		a false statement, o \$250,000, or imp	concealing property,	nd I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection 0 years, or both.
	nzo Williams		avia Tinsley	
Signa	ature of Debtor 1	Signat	ure of Debtor 2	
Date	April 16, 2019	Date	April 16, 2019	
Did yo	ou attach additional pages to Your Statem	nent of Financial A	Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
■ No				

# United States Bankruptcy Court Eastern District of Michigan

	zo Williams tavia Tinsley	Case No.
	Debtor(s)	Chapter 7
	STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)	1
The un	ndersigned, pursuant to F.R.Bankr.P. 2016(b), states that:	
The un	ndersigned is the attorney for the Debtor(s) in this case.	
The co	ompensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check of	one]
[X]	FLAT FEE	
A.	For legal services rendered in contemplation of and in connection with this case,	
	exclusive of the filing fee paid	1,000.00
B.	Prior to filing this statement, received	. 0.00
C.	The unpaid balance due and payable is	1,000.00
D.	The total charge for Attorney fees and costs up to and including confirmation hearing may exceed the flat fee stated in 2.A. If the total fees and costs expended your behalf exceed the flat fee stated in A, then an Application for Attorney Fees will be filed with the court and you will be provided with notice and the opportunt to review the fees and object. Circumstances which can lead to MAXWELL DUN PLC electing to file a fee application include, but are not limited to, missed or additional hearings, objections to proof of claims, objections to Plans, motions fo relief from stay, and other factors that MAXWELL DUNN, PLC may not be able anticipate at the time of consultation and/or preparation of documents.	nity IN, r
	The flat rate does NOT include any work performed on your behalf post-confirmation. Work performed on your behalf after the confirmation of your case will be billed at an hourly rate (see B. below) and an Application for Attorned Fees will be filed with the court and you will be provided with notice and the opportunity to review the fees and object.  Attorney fees are non-contingent based. In the event of early termination of case dismissal, voluntary dismissal, case conversion, etc. an Application for Attorney	ey
	Fees will be filed with the court for work performed.	
[]	RETAINER	
A.	Amount of retainer received	
B.	The undersigned shall bill against the retainer at an hourly rate of \$ [Or attagreed to pay all Court approved fees and expenses exceeding the amount of the whenever MAXWELL DUNN, PLC elects to file a fee application pursuant to the above.	retainer. The above rate shall be effec
\$0.0	of the filing fee has been paid.	
	rn for the above-disclosed fee, I have agreed to render legal service for all aspects of to not apply.]	the bankruptcy case, including: [Cros
A.	Analysis of the debtor's financial situation, and rendering advice to the debtor in d bankruptcy;	•
B. C.	Preparation and filing of any petition, schedules, statement of affairs and plan whi Representation of the debtor at the meeting of creditors and confirmation hearing,	and any adjourned hearings thereof;
<del>D.</del> —	<ul> <li>Representation of the debtor in adversary proceedings and other contested bankruj</li> <li>Reaffirmations;</li> </ul>	<del>ptcy matters;</del>
F.—	Redemptions;	
G.—	—Other:	

The source of payments to the undersigned was from:

Debtor(s)' earnings, wages, compensation for services performed

	B.	XX	Other (describe, including the identity of payor)	To be paid by pre-paid legal services plan
7.		0	ot shared or agreed to share, with any other person, othe ensation paid or to be paid except as follows:	er than with members of the undersigned's law firm or
Dated:	April 1	16, 2019		/s/ Tierney Eaton-Hoffman
				Attorney for the Debtor(s)
				Tierney Eaton-Hoffman P80759
				MAXWELL DUNN, PLC
				24725 W. 12 Mile Rd., Ste. 306
				Southfield, MI 48034
				(248) 246-1166 bankruptcy@maxwelldunnlaw.com
Agreed:	/s/ Alfo	onzo William	S	/s/ Shontavia Tinsley
	Alfonz	o Williams		Shontavia Tinsley
	Debtor	r		Debtor

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
_	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court Eastern District of Michigan**

In re	Alfonzo Williams Shontavia Tinsley		Case No.	
III IC	Shoritavia Tilisley	Debtor(s)	Chapter 7	
	VERIFIC	ATION OF CREDITOR	MATRIX	
The abo	ove-named Debtors hereby verify that the	attached list of creditors is true and c	orrect to the best of the	neir knowledge.
Date:	April 16, 2019	/s/ Alfonzo Williams		
		Alfonzo Williams		
		Signature of Debtor		
Date:	April 16, 2019	/s/ Shontavia Tinsley		
		Shontavia Tinsley		
		Signature of Debtor		

State of Michigan Department of Treasury PO Box 30199 Lansing, MI 48909-7699

Approved Cash 27219 W. Seven Mile Rd. Redford, MI 48240

Art Van 6500 14 Mile Rd. Warren, MI 48092

Bank of America 100 N. Tryon St. Charlotte, NC 28255

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One 15000 Capital One Dr Richmond, VA 23238

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Po Box 15298 Wilmington, DE 19850

Check 'n Go 4880 NW 183RD St., Ste. C Opa Locka, FL 33055

Citation Club Apartments 29540 Citation Club Circle Farmington, MI 48331

Comenity Bank/Carsons Po Box 182789 Columbus, OH 43218

Comenity Bkl/Ulta Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bkl/Ulta Po Box 182120 Columbus, OH 43218

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Credit Acceptance Po Box 513 Southfield, MI 48037

Credit Collection Services Attn: Bankruptcy 725 Canton St Norwood, MA 02062

Credit Collection Services Po Box 607 Norwood, MA 02062

Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Department of Education/Nelnet 3015 Parker Rd Aurora, CO 80014

Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Deptartment Store National Bank/Macy's Po Box 8218
Mason, OH 45040

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Jefferson Capital Systems, LLC Po Box 1999 Saint Cloud, MN 56302

Jefferson Capital Systems, LLC 16 Mcleland Rd Saint Cloud, MN 56303

Kohls/Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

LVNV Funding/Resurgent Capital Po Box 1269 Greenville, SC 29602

Merchants & Medical Credit Corp Attn: Bankruptcy 6324 Taylor Drive Flint, MI 48507 Merchants & Medical Credit Corp 6324 Taylor Dr Flint, MI 48507

Michigan Dept of Human Services Welfare Debt Unit PO Box 30025 Lansing, MI 48909

Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Nelnet 3015 S Parker Rd Aurora, CO 80014

Portfolio Recovery Po Box 41021 Norfolk, VA 23541

Portfolio Recovery 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Progressive Leasing 256 W. Data Dr. Draper, UT 84020

Roosen Varchetti & Olivier P.O. Box 2305 Mount Clemens, MI 48046

Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161

Shontavia Tinsley 29924 Meridian Place 21101 Farmington, MI 48331 TekCollect Inc Attn: Bankruptcy Po Box 1269 Columbus, OH 43216

TekCollect Inc Pob 1269 Columbus, OH 43216

U.S. Department of Education Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116

U.S. Department of Education Po Box 5609 Greenville, TX 75403